PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032

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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 |  |   |  |  |                  |   | Application or Docket Number<br>10/815,563 |   |     | ing Date<br>31/2004           | To be Mailed           |  |
|---|--|---|--|--|------------------|---|--|---|-----|-------------------------------|------------------------|--|
| APPLICATION AS FILED – PART I (Column 1) (Column 2)                     |  |   |  |  |                  |   | SMALL ENTITY                               |   |     | OTHER THAN<br>OR SMALL ENTITY |                        |  |
| ⊢   | FOR  |   | NUMBER FILED                               |  | NUMBER EXTRA     |   | RATE (\$)                                  | FEE (\$)                                | OK. | RATE (\$)                     | FEE (\$)               |  |
|   | BASIC FEE  | $\neg$                                    | N/A  | LD NO  | N/A              |   | N/A  | TEE (a)                                 | l   | N/A                           | TEE (0)                |  |
| ┢   | (37 CFR 1.16(a), (b), s<br>SEARCH FEF  | or (c))                                   |  |  |                  |   |  |   | ł   | <del></del>                   |                        |  |
| H   | (37 CFR 1.16(k), (i), (ii)   |   | N/A  | _  | N/A              |   | N/A  |   | l   | N/A                           |                        |  |
| TO  | (37 CFR 1.16(o), (p), (  |   | N/A  | _  | N/A              |   | N/A  |   | ١   | N/A                           |                        |  |
| (37   | CFR 1.16(i))   |   | minus 20 = *                               |  | •                |   | x \$ =                                     |   | OR  | x \$ =                        |                        |  |
|   | EPENDENT CLAIM<br>CFR 1.16(h))   |   | minus 3 = *  If the specification and draw |  |                  |   | x \$ =                                     |   |     | x \$ =                        |                        |  |
|   | APPLICATION SIZE<br>(37 CFR 1.16(s))   | FEE shee<br>is \$2<br>addit               | ts of pap<br>50 (\$125<br>ional 50 s       | gs exceed 100<br>on size fee due<br>for each<br>n thereof. See<br>CFR 1.16(s). |                  |   |  |   |     |                               |                        |  |
|   | MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))  |   |  |  |                  |   |  |   | 1   |                               |                        |  |
| * If  | * If the difference in column 1 is less than zero, enter "0" in column 2.  |   |  |  |                  |   |  |   | 1   | TOTAL                         |                        |  |
| APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)      |  |   |  |  |                  |   |  | OTHER THAN SMALL ENTITY OR SMALL ENTITY |     |                               |                        |  |
| AMENDMENT   | 06/26/2008   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR                                    | PRESENT<br>EXTRA |   | RATE (\$)                                  | ADDITIONAL<br>FEE (\$)                  |     | RATE (\$)                     | ADDITIONAL<br>FEE (\$) |  |
|   | Total (37 CFR<br>1.16(1))  | · 16                                      | Minus                                      | <b>~</b> 40  | = 0              | 1 | x \$ =                                     |   | OR  | X \$50=                       | 0                      |  |
|   | Independent<br>(37 CFR 1.16(h))  | • 7                                       | Minus                                      | ···7   | = 0              | 1 | x \$ =                                     |   | OR  | X \$210=                      | 0                      |  |
|   | Application Size Fee (37 CFR 1.16(s))  |   |  |  |                  |   |  |   | T   |                               |                        |  |
| ^   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))  |   |  |  |                  |   |  |   | OR  |                               |                        |  |
|   |  |   |  |  |                  |   | TOTAL<br>ADD'L<br>FEE                      |   | OR  | TOTAL<br>ADD'L<br>FEE         | 0                      |  |
| (Column 1) (Column 2) (Column 3)  |  |   |  |  |                  |   |  |   |     |                               |                        |  |
| AMENDMENT   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR                                    | PRESENT<br>EXTRA |   | RATE (\$)                                  | ADDITIONAL<br>FEE (\$)                  |     | RATE (\$)                     | ADDITIONAL<br>FEE (\$) |  |
|   | Total (37 CFR<br>1,16())   |   | Minus                                      |  | =                | 1 | x \$ =                                     |   | OR  | x \$ =                        |                        |  |
|   | Independent<br>(37 CFR 1.16(h))  | •   | Minus                                      | ***  |                  | ] | x \$ =                                     |   | OR  | x s =                         |                        |  |
| 띪   | Application Size Fee (37 CFR 1.16(s))  |   |  |  |                  | ] |  |   | ]   |                               |                        |  |
| AM  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))  |   |  |  |                  |   |  |   | OR  |                               |                        |  |
|   |  |   |  |  |                  |   | TOTAL<br>ADD'L<br>FEE                      |   | OR  | TOTAL<br>ADD'L<br>FEE         |                        |  |
| **  | " If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "30".  "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For "(Total or Independent) is the highest number found in the appropriate box in column 1. |   |  |  |                  |   |  |   |     |                               |                        |  |

This collection of information is orquired by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public with in it is life (and by the USFTO to process) an application Confidentiality is operand by 38 US 6.2 22 and 37 CFR 1.4. 1 this collection is estimated to the 12 minutes to complete, encuding pathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the CERF (information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrius, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandrius, VA 22313-1450.